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ABSTRACT

Characteristics of outstanding schools of the allied health profession were identified in order that the School of Community and Allied Health, University of Alabama in Birmingham could undertake short-range and long-range planning. A second goal was to develop a set of criteria that might be used by other schools of the allied health professions to evaluate themselves and plan for development. A meeting was held of experts drawn from the southeastern region and beyond, and a list was compiled of 47 characteristics of an outstanding school of the allied health professions. The list was organized into a Delphi-type questionnaire, and each panel member rated the importance of each characteristic. A nationwide survey of deans of schools of allied health was conducted to have the deans rate the same 47 characteristics' importance in the evaluation of an outstanding school located in an academic health center. The results were summarized and mailed to respondents, who were asked to rerate the original 47 characteristics in light of the feedback, and to rate an additional 25 characteristics that had been identified. The final stage was to have the administrators of the Alabama University School of Community and Allied Health agree upon the importance of the characteristics provided by the panel of experts and to assess the current level at which the university is exhibiting those characteristics. The various questionnaires and summary of results are appended. (SW)

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CHARACTERISTICS OF OUTSTANDING SCHOOLS OF THE ALLIED HEALTH PROFESSIONS WHICH ARE LOCATED IN ACADEMIC HEALTH CENTERS

U S DEPARTMENT OF HEALTH, EDUCATION & WELFARE
NATIONAL INSTITUTE OF EDUCATION

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Schools of the allied health professions are complex structures composed of multiple professional programs. In contrast to the inherent unity in single-profession schools such as nursing, schools of the allied health professions are characterized by diversity. Each professional program has its own set of interests, biases, and loyalties.

Each professional program within the school typically has developed clear-cut goals and objectives and plans for their accomplishment. Far too often, these are not directly related to school-wide goals, objectives, and plans. Certainly they should be if the school and its programs are to achieve excellence.

The method of developing school-wide goals has historically been through a planning committee comprised of the directors of the programs within the school and representatives from administration. Frequently, these committees have failed to produce broad objectives because of the professional biases of the committee members. This has been a long-standing problem, and one which deserves careful attention by the administration of any school of the allied health professions.

The School of Community and Allied Health (SCAH) of the University of Alabama in Birmingham (UAB) has recently tried a new approach to formulating its short- and long-range goals. Actually, SCAH's method involves three steps, the first two of which may or may not need to be duplicated by other schools of the allied health professions.

Step one of the SCAH plan involved the selection of a small panel of experts drawn from the southeastern region and beyond. Each panel member possessed a broad knowledge and had demonstrated excellence of service in the field of allied health education. Dr. Keith D. Blayney, Dean of the School of Community and Allied Health, chose the five-member panel and served also as an active participant, bringing the total panel size to six. The individuals chosen were as follows: Dr. Stanley H. Abadie, Dean, School of Allied Health Professions, Louisiana State University Medical Center at New Orleans; Joseph Hamburg, M.D., Dean, College of Allied Health Professions, University of Kentucky; John Rhodes Haverty, M.D., Dean, College of Allied Health Sciences, Georgia State University; Dr. Robert F. Kinsinger, Vice-President, W. K. Kellogg Foundation; and

Dr. Darrel J. Mase, Professor and Dean Emeritus, College of Health Related Professions, University of Florida. All panel members were asked to come to Birmingham for an all-day brainstorming session on the characteristics of an outstanding school of the allied health professions.

At a dinner meeting the night prior to the all-day session, panel members were given primary and secondary objectives as follows:

PRIMARY

To identify the characteristics of outstanding schools of the allied health professions in order that the School of Community and Allied Health, University of Alabama in Birmingham, may develop short- and long-range plans toward achieving and maintaining excellence.

SECONDARY

To develop a set of criteria which might be used by other schools of the allied health professions to evaluate themselves and plan for development.

During one full working day session, the group sought to accomplish the stated objectives. Recorders were present to take down all ideas as they were put forth by the group; no attempt was made to arrive at a final consensus on any given characteristic. However, a moderator was present to help keep the group on target and to prevent, if possible, extensive debate on any single issue.

Following the meeting, a list was compiled of forty-seven characteristics of an outstanding school of the allied health professions as had been identified by the panel of experts. The list was organized into a Delphi-type questionnaire (See Appendix I) and mailed to each panel member for his completion. Members were asked to rate the importance of each characteristic in the evaluation of an outstanding school of the allied health professions. (A five-part scale was utilized, 4 representing highest importance and 0 representing not important at all.) All members responded, and the mean ratings of each of the forty-seven characteristics appear in Table 1.

TABLE 1

MEAN RESPONSES OF GROUP TO LIST OF CHARACTERISTICS OF OUTSTANDING SCHOOLS OF THE ALLIED HEALTH PROFESSIONS ON QUESTIONNAIRE

Original No. of Characteristic	Characteristic as Listed	Mean Ranking of Characteristic on Scale Provided
14.	The dean possesses leadership skills.	4.0
16.	The dean has a background in a health profession, or in the education of health manpower, sufficient for him/her to understand the health process and health care system.	4.0
34.	The school has sufficient "hard money" funding to maintain stability--i.e., to survive on a school-wide basis if all "soft money" were withdrawn.	3.8
1.	There is a clear statement of mission which is publicized and understood within the school and the institution of which it is a part.	3.5
10.	There is support of the school by the "power structure" of the institution (i.e., the central administration).	
12.	The dean (chief executive officer) of the school has administrative equality with his/her peers.	3.5
15.	The dean is amenable to change.	3.5

Original No. of Characteristic	Characteristic as Listed	Mean Ranking of Characteristic on Scale Provided
35.	The school has the ability to compete effectively for extramural funding.	3.5
36.	Good counseling services are available to the students of the school.	3.5
38.	The school conducts follow-up studies on its graduates (to measure the product).	3.5
42.	The school has the ability to "permeate" other units of the institution in meaningful interrelationships.	3.5
2.	Periodic self-study is done to evaluate accomplishment of the mission and to modify statement of mission if appropriate.	3.3
3.	Use is made of objective data on the need for specific allied health curricula to avoid proliferation of program offerings.	3.3
5.	The number of programs does not exceed the school's resources--particularly those for clinical experience.	3.3
9.	There is understanding and support of the school by the chief executive officer of the institution.	3.3
13.	The dean has proper administrative authority within the organizational structure of the institution.	3.3
27.	The faculty retain clinical competencies.	3.3
33.	All instructional programs are accredited as soon as eligible.	3.3

Original No. of Characteristic	Characteristic as Listed	Mean Ranking of Characteristic on Scale Provided
41.	The school is innovative in meeting the future demands of the health care system.	3.3
17.	The dean is recognized as a leader in the field of health care and/or the education of health manpower.	3.2
18.	The dean has a global perspective on health issues.	3.2
23.	Adequate support services are available.	3.2
29.	The school has an effective faculty development program.	3.2
37.	The student retention rate is high.	3.2
39.	The programs of the school do not produce more graduates than can be employed.	3.2
44.	The school has an active continuing education program.	3.2
7.	Imaginative use is made of clinical resources.	3.0
11.	The central administration of the institution is flexible and imaginative.	3.0
19.	The dean is a good "politician."	3.0
21.	The school has a strong "inside man" (this could be the dean).	3.0
40.	The school has adequate space which is its own specified and identifiable "turf."	

Original No. of Characteristic	Characteristic as Listed	Mean Ranking of Characteristic on Scale Provided
43.	The students receive a strong liberal education along with their professional education.	3.0
20.	The dean has substantial contact with the "outside"--he is a strong "outside" man.	2.8
24.	A large percentage of the faculty have master's and doctoral degrees.	2.8
6.	The school is located in a medical "community" in which those clinical services essential to the instructional programs are present.	2.7
25.	The faculty are productive in research.	2.7
26.	The faculty are productive in community service.	2.7
28.	The faculty are active in their respective professional associations.	2.7
31.	Instructional programs are appropriately clustered by similarity of discipline and/or level.	2.7
46.	The turn-over rate of faculty and administrators is low in the school.	2.7
8.	Other outstanding schools are present within the institution.	2.3
45.	The school prepares administrators and educators as well as practitioners.	2.3

	Original No. of Characteristic	Characteristic as Listed	Mean Ranking of Characteristic on Scale Provided
	47.	There is an upward and outward flow of the faculty and administrators--i.e., the school "spawns" leaders for schools of the allied health professions in other institutions.	2.3
Not considered important by the panel.	4.	The school operates a minimum of five curricula.	2.2
	22.	The dean and his support staff compensation is higher than the national average.	2.2
	30.	The faculty compensation is higher than the national average.	2.2
	32.	Instructional programs are interrelated with those of the same discipline in other institutions.	2.2

It was concluded that forty-three of the forty-seven characteristics (excluding 4, 22, 30, and 32) were felt by the panel to be good indicators of an outstanding school of the allied health professions. Having determined what a panel of experts in allied health education felt to be the characteristics of an outstanding school, the School of Community and Allied Health was then ready to undertake step two of its plan to establish school-wide goals for growth and development.

Step two involved a nationwide survey of deans of schools of allied health. The National Commission on Allied Health Education was contacted and asked to supply a listing of deans of schools of allied health, some of which were to be deans of schools located in academic health centers and others which were not. Each dean was then asked to rate the same forty-seven characteristics as had been identified by the original panel relative to each characteristic's importance in the evaluation of an outstanding school located in an academic health center. Again the questionnaire was of a Delphi-type and was labeled Questionnaire I (See Appendix II).

A total of fifty-nine questionnaires were originally mailed, asking selected persons to participate in the study. A total of twenty-nine were returned in time for analysis, representing a return rate of 49.2%. The acceptable rate for a Delphi-type study on the first round of questioning is usually considered to be between forty and sixty percent. Hence the response rate for the first mailing was within the acceptable range.

The mean response was tabulated for all forty-seven characteristics. Means ranged from a high of 3.86 (characteristic 34) to a low of 1.71 (characteristic 4). The median mean response was 3.14 (characteristics 37 and 44).

The characteristics were also rank ordered based on mean response. The top five were as follows:

RANK	CHARACTERISTIC	MEAN RESPONSE
1	34. The school has sufficient "hard money" funding to maintain stability, i.e., to survive on a school-wide basis if all soft money were withdrawn.	3.86

RANK	CHARACTERISTIC	MEAN RESPONSE
2	13. The dean has proper administrative authority within the organizational structure of the institution.	3.83
3	14. The dean possesses leadership skills.	3.83
4	12. The dean (chief executive officer) of the school has administrative equality with his/her peers.	3.79
5	9. There is understanding and support of the school by the chief executive officer of the institution.	3.79

The bottom five were as follows:

RANK	CHARACTERISTIC	MEAN RESPONSE
43	47. There is an upward and outward flow of the faculty and administrators--i.e., the school spawns leaders for schools of the allied health professions in other institutions.	2.33
44	30. The faculty compensation is higher than the national average.	2.07
45	22. The dean and his support staff compensation is higher than the national average.	1.76
46	32. Instructional programs are interrelated with those of the same discipline in other institutions.	1.76
47	4. The school operates a minimum of five curricula.	1.71

It is interesting to note that of the characteristics ranked one through five, three relate specifically to the dean and his position in the organizational structure of the school and institution. Of those ranked forty-three through forty-seven, two relate to dean/staff/faculty compensation.

Included on the tabular summary of Questionnaire I (See Appendix III) is a frequency distribution of the responses. One can see that on no single item were respondants in total agreement. However, six of the characteristics were rated four, very important, by 80% or more of the

respondants. These were characteristics 5, 9, 12, 13, 14, and 34. Again, these relate primarily to the qualifications of the dean and the school's available resources, both financial and clinical. Those characteristics receiving a rating of 0, unimportant, by a number of the respondants were characteristics 4 (31.0%), 22 (20.7%), and 30 (13.8%). These three characteristics relate to compensation and school size.

Certain characteristics tended to evoke widely varying opinions, that is the responses were scattered widely along the five-point scale. Noteworthy here are characteristics 4 (school size), 8 (other outstanding schools within the institution), 22 (dean and support staff compensation), 25 (faculty research), 30 (faculty compensation), 31 (clustered programs within school), 32 (interrelated programs), and 39 (producing employable graduates). Others scattered to a lesser degree can be identified by scanning the frequency distribution on the tabular summary. The summary of comments included on the tabular summary helps to point out the rationale behind the widely varying responses.

Twenty-five additional characteristics were identified by the experts queried on the first round of questioning (See Table 2). Generally, these additions could be classified into three broad categories: (1) quality of faculty and instruction; (2) the dean's/ faculty's interaction with outside forces; and (3) the quality and dedication of the school's graduates.

In summary, there seemed to be a tendency for the respondants to rate all the characteristics somewhat high, indicating by comments that all the characteristics listed would be desirable. However, there did appear to be a marked tendency to rate internal concerns somewhat higher as opposed to more external, "flashy" activities, such as research and community service. More emphasis was placed on good school leadership and internal methods of assuring the education of competent allied health practitioners. This is certainly of interest when one considers we were looking for characteristics of exemplary schools of allied health.

The results of Questionnaire I were summarized in both narrative and tabular form and mailed to each respondant. It was hoped that with a second round of questioning, accompanied by the feedback from round one, there would be an even more significant clustering of related items, and

TABLE 2

CHARACTERISTICS ADDED BY RESPONDANTS TO QUESTIONNAIRE I

1. Quality and peer recognition of faculty.
2. The ability to attract and retain a strong faculty.
3. Faculty have control of respective curricula.
4. Access to strong medical and basic science faculty.
5. Effective methods of instruction and evaluation.
6. School (faculty) controls admissions.
7. The school has strong curricula chairmen.
8. The school has a strong supportive staff.
9. Department chairmen have necessary autonomy to run their programs.
10. The dean/faculty have a strong influence on the Board of Education, Regents, etc. in area planning.
11. The dean/faculty are involved with HSAs etc. on local and state basis.
12. The school has tenure (or long-term non-tenure) arrangements for clinical faculty.
13. The school has a good record of "publications."
14. The school does research.
15. The graduates are employed and are highly thought of.
16. The graduates stay in the field.
17. The dean holds important "outside" positions in or related to the field.
18. The school provides opportunities for clinical activities with other health profession students.
19. The school engages in cooperative clinical and health science research.
20. There is evidence of college student body strength by leadership roles among total university student body.
21. There is limited clinical experience in rural hospitals not in proximity of a medical/health center.
22. The school has a 10-year plan which is updated yearly.
23. The dean has a positive working relationship with the dean of the medical school.
24. The dean has a positive working relationship with the other deans of other professional schools in the center.
25. The dean has a positive working relationship with the administrator of the teaching hospital.

more finite conclusions might be drawn. Therefore respondants were mailed Questionnaire II (See Appendix IV) and asked to rerate the original forty-seven characteristics in light of the feedback from Questionnaire I, and to rate the additional twenty-five characteristics which had been identified.

Of the twenty-nine individuals to whom Questionnaire II was mailed, twenty-seven responded, thus constituting a return rate of 93.1%. The following is a tabular comparison of the statistical results of Questionnaires I and II based on the original forty-seven characteristics.

MEAN RANGE

QUESTIONNAIRE I	QUESTIONNAIRE II
3.86 (char. 34) to 1.71 (char.4)	4.00 (char. 34) to 1.33 (char. 4)

MEDIAN MEAN

QUESTIONNAIRE I	QUESTIONNAIRE II
3.14 (characteristics 37 & 44)	3.12 (characteristics 37 & 40)

	QUESTIONNAIRE I		QUESTIONNAIRE II	
RANK	CHARACTERISTIC NUMBER	MEAN RESPONSE	CHARACTERISTIC NUMBER	MEAN RESPONSE
1	34	3.86	34	4.00
2	13	3.83	5	3.96
3	14	3.83	9	3.93
4	12	3.79	12	3.89
5	9	3.79	13	3.85
43	47	2.33	30	2.16
44	30	2.07	47	2.15
45	22	1.76	22	1.88
46	32	1.76	32	1.69
47	4	1.71	4	1.33

Characteristics rated 4, very important, by 80% or more of the respondants:

QUESTIONNAIRE I	QUESTIONNAIRE II
CHARACTERISTIC NUMBER	CHARACTERISTIC NUMBER
5	5
9	9
12	10
13	12
14	13
34	14
	34

Characteristics receiving a rating of 0, unimportant, by the respondants:

QUESTIONNAIRE I	QUESTIONNAIRE II
CHARACTERISTIC NUMBER AND %	CHARACTERISTIC NUMBER AND %
4 (31.0%)	4 (44.4%)
22 (20.7%)	22 (07.4%)
30 (13.8%)	30 (07.4%)

Characteristics demonstrating the greatest change in rank:

CHARACTERISTIC NUMBER	RANK ON QUESTIONNAIRE I	RANK ON QUESTIONNAIRE II
5	6	2
43	18	23
40	21	25
35	22	18
44	25	33
41	28	22
39	35	39
46	37	41
18	41	34

As can be seen by comparing the responses on Questionnaire I to those on Questionnaire II (See Appendix V for detail.), there appears to be very little change of opinion. Opinion remains widely scattered on several characteristics just as on Questionnaire I. Though it cannot definitely be said why the change was minimal, there are some factors one might consider:

1. The varied backgrounds of the individuals surveyed;
2. The diverse nature of allied health education; and
3. A variance in the mission of the individual schools whose deans were surveyed.

Probably a combination of these factors came into play. Yet the failure to arrive at consensus on many of the characteristics certainly does not lessen the value of the study. Seventy-two potential school "goals" have been identified and rated by a panel of deans. Forty-seven of these were rated and analyzed twice. It was not felt that a second rating of items forty-eight through seventy-two would be of any value as the primary objective of the study had been met. (See Appendix VI for a complete summary of Questionnaire II.) The results provide an excellent beginning for an internal assessment of strengths and weaknesses and a basis for long range planning.

Step three of the SCAH plan is to develop a questionnaire for submission to the SCAH administration and program directors for the purpose of obtaining their consensus (1) concerning the importance of the characteristics of excellence agreed upon by the panel of experts, and (2) concerning the current level at which SCAH is exhibiting those characteristics. This activity will require that the SCAH program directors look at the school as a whole rather than as a series of individual units. Of course, recipients of the questionnaire will be encouraged to add characteristics they feel have been omitted, adding the family touch to a process which has thus far excluded "family members," with the exception of the dean.

The results of these questionnaires will then be analyzed and utilized as a basis for constructing a long-range plan for the School of Community and Allied Health via an organized planning committee. The long-range plan will include the development of those characteristics now lacking and the strengthening of those areas in which SCAH is weak as evidenced by the questionnaires.

SCAH feels that the strength of this process lies in the careful meshing of external opinion and internal analysis of the input from the experts. The survey provided a far more global perspective on the components of an outstanding school of the allied health professions than would have been possible by utilizing the SCAH faculty alone, for again allied health professionals tend to overlook the total picture in their efforts to further the progress of their own professional groups. This phenomenon is understandable, yet could prove to be detrimental to the future of schools of allied health professions. Utilizing the SCAH method, allied health educators are given the opportunity to become involved in their school's planning effort, and at the same time, the school is provided protection from guidance by a set of objectives or goals weighted toward the special interests of its component professional groups. This is felt to be a workable compromise between administration and faculty, one that should prove to be beneficial to all involved.

It is hoped that other schools will benefit from SCAH's attempt to identify the characteristics of an outstanding school of allied health professions, using the criteria established as a basis for evaluation of current activities in an attempt to give direction to plans for future

development. Both short- and long-range plans are essential for future growth of any organization, and schools of the allied health professions are certainly no exception.

APPENDIX I

QUESTIONNAIRE

CHARACTERISTICS OF AN OUTSTANDING SCHOOL
OF THE ALLIED HEALTH PROFESSIONS

What do you consider to be the characteristics of an outstanding school of the allied health professions? Consider the following list which has been formulated on the basis of the brain-storming session in which you participated. Add any which you feel have been omitted.	In your best judgment how important is each characteristic in the evaluation of an outstanding school of the allied health professions? Check the appropriate column.				
	Highest Importance				Not Important
	4	3	2	1	0
1. There is a clear statement of mission which is publicized and understood within the school and the institution of which it is part.					
2. Periodic self-study is done to evaluate accomplishment of the mission and to modify statement of mission if appropriate.					
3. Use is made of objective data on the need for specific allied health curricula to avoid proliferation of program offerings.					
4. The school operates a minimum of 5 curricula.					
5. The number of programs does not exceed the school's resources - particularly those for clinical experience.					
6. The school is located in a medical "community" in which those clinical services essential to to the instructional programs are present.					
7. Imaginative use is made of clinical resources.					
8. Other outstanding schools are present within the institution.					
9. There is understanding and support of the school by the chief executive officer of the institution.					
10. There is support of the school by the "power structure" of the institution (i.e., the central administration).					

What do you consider to be the characteristics of an outstanding school of the allied health professions? Consider the following list which has been formulated on the basis of the brainstorming session in which you participated. Add any which you feel have been omitted.	In your best judgment how important is each characteristic in the evaluation of an outstanding school of the allied health professions? Check the appropriate column.				
	Highest Importance				Not Important
	4	3	2	1	0
11. The central administration of the institution is flexible and imaginative.					
12. The dean (chief executive officer) of the school has administrative equality with his/her peers.					
13. The dean has proper administrative authority within the organizational structure of the institution.					
14. The dean possesses leadership skills.					
15. The dean is amenable to change.					
16. The dean has a background in a health profession, or in the education of health manpower, sufficient for him/her to understand the health process and health care system.					
17. The dean is recognized as a leader in the field of health care and/or the education of health manpower.					
18. The dean has a global perspective on health issues.					
19. The dean is a good "politician."					
20. The dean has substantial contact with the "outside" - he is a strong "outside" man.					
21. The school has a strong "inside man" (this could be the dean).					
22. The dean and his support staff compensation is higher than the national average.					
23. Adequate support services are available.					
24. A large percentage of the faculty have master's and doctoral degrees.					

What do you consider to be the characteristics of an outstanding school of the allied health professions? Consider the following list which has been formulated on the basis of the brainstorming session in which you participated. Add any which you feel have been omitted.	In your best judgment how important is each characteristic in the evaluation of an outstanding school of the allied health professions? Check the appropriate column.				
	Highest Importance				Not Important
	4	3	2	1	0
25. The faculty are productive in research.					
26. The faculty are productive in community service.					
27. The faculty retain clinical competencies.					
28. The faculty are active in their respective professional associations.					
29. The school has an effective faculty development program.					
30. The faculty compensation is higher than the national average.					
31. Instructional programs are appropriately clustered by similarity of discipline and/or level.					
32. Instructional programs are interrelated with those of the same discipline in other institutions.					
33. All instructional programs are accredited as soon as eligible.					
34. The school has sufficient "hard money" funding to maintain stability - i.e., to survive on a school-wide basis if all "soft money" were withdrawn.					
35. The school has the ability to compete effectively for extramural funding.					
36. Good counseling services are available to the students of the school.					
37. The student retention rate is high.					
38. The school conducts follow-up studies on its graduates (to measure the product).					
39. The programs of the school do not produce more graduates than can be employed.					

What do you consider to be the characteristics of an outstanding school of the allied health professions? Consider the following list which has been formulated on the basis of the brain-storming session in which you participated. Add any which you feel have been omitted.	In your best judgment how important is each characteristic in the evaluation of an outstanding school of the allied health professions? Check the appropriate column.				
	Highest Importance				Not Important
	4	3	2	1	0
40. The school has adequate space which is its own specified and identifiable "turf."					
41. The school is innovative in meeting the future demands of the health care system.					
42. The school has the ability to "permeate" other units of the institution in meaningful interrelationships.					
43. The students receive a strong liberal education along with their professional education.					
44. The school has an active continuing education program.					
45. The school prepares administrators and educators as well as practitioners.					
46. The turn-over rate of faculty and administrators is low in the school.					
47. There is an upward and outward flow of the faculty and administrators - i.e., the school "spawns" leaders for schools of the allied health professions in other institutions.					
(Add below any characteristics that you feel have been omitted and check the appropriate column to the right).					
48.					
49.					
50.					
51.					
52.					
53.					
54.					
55.					

APPENDIX II

QUESTIONNAIRE I

CHARACTERISTICS OF OUTSTANDING *SCHOOLS OF THE ALLIED HEALTH PROFESSIONS
WHICH ARE LOCATED IN ACADEMIC HEALTH CENTERS

What do you consider to be the characteristics of outstanding schools of the allied health professions which are located in academic health centers? Consider the following list, adding any that you feel have been omitted.	In your best judgment, how important is each characteristic in the evaluation of these outstanding schools? Please check only one column for each characteristic, using the following rating: 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					Why did you rate the characteristic as you did? Please explain briefly your rationale for each rating? You may use the back of the questionnaire if you need additional space.
	4	3	2	1	0	
1. There is a clear statement of mission which is publicized and understood within the school and the institution of which it is a part.						
2. Periodic self-study is done to evaluate accomplishment of the mission and to modify statement of mission if appropriate.						
3. Use is made of objective data on the need for specific allied health curricula to avoid proliferation of program offerings.						
4. The school operates a minimum of five curricula.						
5. The number of programs does not exceed the school's resources - particularly those for clinical experience.						

* The term "school" is used here simply as a matter of convenience. For the purposes of this study, it is to be considered synonymous with college, division, etc.

CHARACTERISTICS	RATING 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					RATIONALE
	4	3	2	1	0	
6. The school is located in a medical "community" in which those clinical services essential to the instructional programs are present.						
7. Imaginative use is made of clinical resources.						
8. Other outstanding schools are present within the institution.						
9. There is understanding and support of the school by the chief executive officer of the institution.						
10. There is support of the school by the "power structure" of the institution (i.e., the central administration).						
11. The central administration of the institution is flexible and imaginative.						
12. The dean (chief executive officer) of the school has administrative equality with his/her peers.						
13. The dean has proper administrative authority within the organizational structure of the institution.						
14. The dean possesses leadership skills.						
15. The dean is amenable to change.						

CHARACTERISTICS	RATING 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					RATIONALE
	4	3	2	1	0	
16. The dean has a background in a health profession, or in the education of health manpower, sufficient for him/her to understand the health process and health care system						
17. The dean is recognized as a leader in the field of health care and/or education of health manpower.						
18. The dean has a global perspective on health issues.						
19. The dean is a good "politician."						
20. The dean has substantial contact with the "outside" - he is a strong "outside" man.						
21. The school has a strong "inside man" (this could be the dean).						
22. The dean and his support staff conpensation is higher than the national average.						
23. Adequate support services are available.						
24. A large percentage of the faculty have master's and doctoral degrees.						
25. The faculty are productive in research.						
26. The faculty are productive in community service.						

CHARACTERISTICS	RATING 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					RATIONALE
	4	3	2	1	0	
27. The faculty retain clinical competencies.						
28. The faculty are active in their respective professional associations.						
29. The school has an effective faculty development program.						
30. The faculty compensation is higher than the national average.						
31. Instructional programs are appropriately clustered by similarity of discipline and/or level.						
32. Instructional programs are interrelated with those of the same discipline in other institutions.						
33. All instructional programs are accredited as soon as eligible.						
34. The school has sufficient "hard money" funding to maintain stability - i.e., to survive on a school-wide basis if all "soft money" were withdrawn.						
35. The school has the ability to compete effectively for extramural funding.						
36. Good counseling services are available to the students of the school.						
37. The student retention rate is high.						

CHARACTERISTICS	RATING 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					RATIONALE
	4	3	2	1	0	
38. The school conducts follow-up studies on its graduates (to measure the product).						
39. The programs of the school do not produce more graduates than can be employed.						
40. The school has adequate space which is its own specified and identifiable "turf."						
41. The school is innovative in meeting the future demands of the health care system.						
42. The school has the ability to "permeate" other units of the institution in meaningful interrelationships.						
43. The students receive a strong liberal education along with their professional education.						
44. The school has an active continuing education program.						
45. The school prepares administrators and educators as well as practitioners.						
46. The turn-over rate of faculty and administrators is low in the school.						
47. There is an upward and outward flow of the faculty and administrators - i.e., the school spawns leaders for schools of the allied health professions in other institutions.						

Add below any characteristics that you feel have been omitted; check the appropriate column to the right. Attach additional sheets if needed.	RATING 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					Why did you think the characteristic should be added to the list? Briefly explain your rationale for making each addition.
	4	3	2	1	0	
48.						
49.						
50.						
51.						
52.						
53.						
54.						
55.						

APPENDIX III

QUESTIONNAIRE I

SUMMARY OF RESULTS

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION					SUMMARY OF COMMENTS
		4	3	2	1	0	
1. There is a clear statement of mission which is publicized and understood within the school and the institution of which it is a part.	3.48	18	7	4	0	0	Essential for order and planning; must have road map to give common direction; quickly outdated
2. Periodic self-study is done to evaluate accomplishment of the mission and to modify statement of mission if appropriate.	3.41	16	9	4	0	0	To keep current and responsive to changing needs and trends; a part of the accreditation process.
3. Use is made of objective data on the need for specific allied health curricula to avoid proliferation of program offerings.	3.45	17	10	1	1	0	Ensures accountability to the public; promotes quality rather than quantity; must also consider political aspects.
4. The school operates a minimum of five curricula.	1.71	4	6	5	4	9	Numbers are an indication of commitment; cost effectiveness; quality not related to number; depends on individual setting.
5. The number of programs does not exceed the school's resources - particularly those for clinical experience.	3.76	26	1	1	0	1	Necessary for quality; good clinical sites a must for quality outcomes.
6. The school is located in a medical "community" in which those clinical services essential to the instructional programs are present.	3.21	14	8	6	1	0	Clinical sites must be readily available; outside resources just as important; more efficient; desirable but not essential; can use outside resources; clinical sites must be present but not necessarily in a medical community; successful programs exist in all environments.
7. Imaginative use is made of clinical resources.	3.07	12	10	4	0	2	Particularly important if clinical facilities are over utilized; clinical resources are getting tighter; imaginative use does not relate to excellence.
8. Other outstanding schools are present within the institution.	2.68	5	11	7	3	2	Helpful for image, grants, etc.; their resources strengthen the school; adds to credibility; good for recruiting; not essential for quality.
9. There is understanding and support of the school by the chief executive officer of the institution.	3.79	23	6	0	0	0	Necessary for survival; vital to obtain support for allied health as opposed to medicine, etc.

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION 4	3	2	1	0	SUMMARY OF COMMENTS
10. There is support of the school by the "power structure" of the institution (i.e., the central administration).	3.66	19	10	0	0	0	Necessary for survival; necessary to ensure support to achieve quality.
11. The central administration of the institution is flexible and imaginative.	3.03	11	11	5	1	1	Needs to be in any case; necessary to be able to respond to changing needs; allows flexibility in school; helpful but can be circumvented; can be disastrous.
12. The dean (chief executive officer) of the school has administrative equality with his/her peers.	3.79	23	6	0	0	0	Vital for interschool disputes; important to allow allied health to have equal access to resources; otherwise do not get a hearing; essential for faculty morale.
13. The dean has proper administrative authority within the organizational structure of the institution.	3.83	24	5	0	0	0	Helpful for role fulfillment; essential; important so that allied health obtains equal attention when necessary; responsibility without authority is a mockery; essential for proper development of school.
14. The dean possesses leadership skills.	3.83	24	5	0	0	0	Essential; helpful but can be circumvented; diverse professions must function as a part of the whole; a must for the "school."
15. The dean is amenable to change.	3.72	21	8	0	0	0	Change is one of the necessities of survival; helpful, but can be circumvented; otherwise, he won't survive; health care delivery is changing, therefore the educational approach must be dynamic; a special need in allied health.
16. The dean has a background in a health profession, or in the education of health manpower, sufficient for him/her to understand the health process and health care system.	3.38	15	10	4	0	0	Danger of narrow perspective; not essential; failures of allied health centers nationwide more than prove this point; adds credibility and effectiveness; better peer relations; necessary to deal with various educational programs; depends on organizational pattern; one must understand his environment in order to survive.
17. The dean is recognized as a leader in the field of health care and/or education of health manpower.	2.83	7	11	10	1	0	Adds credibility; in-house leadership more important; nice but not critical; administrative ability equally important; necessary for peer recognition and faculty confidence.
18. The dean has a global perspective on health issues.	2.64	5	10	11	2	0	Avoids parochialism; could be too global and unrealistic; if parochial, cannot deal effectively with other deans.
19. The dean is a good "politician."	3.00	8	13	8	0	0	Essential; useful in achieving support and goals; depends on local situation.
20. The dean has substantial contact with the "outside" - he is a strong "outside" man.	2.79	6	12	10	1	0	Helps at regional/state level; helpful but not critical-other people in school can be effective at this; important for public image; center concept dictates this characteristic.

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION 4	3	2	1	0	SUMMARY OF COMMENTS
21. The school has a strong "inside man" (this could be the dean).	3.34	13	13	3	0	0	Needed for smooth functioning; needs to "run the store" himself and not depend on subordinates; necessary for survival and to keep the shop going; someone must play this role on a consistent basis.
22. The dean and his support staff compensation is higher than the national average.	1.76	2	7	8	5	6	Depends on many factors; a lovely idea but everyone can't be above average; money can't always buy competency; money may attract better leadership but no certainty.
23. Adequate support services are available.	3.50	16	10	2	0	0	Vital for smooth functioning; the best programs can be hampered without this; to maintain programs and morale.
24. A large percentage of the faculty have master's and doctoral degrees.	3.24	13	10	6	0	0	Should be minimum of 100%; necessary for credibility with academic world; can they teach-most important; critical; important for equal status with other medical center groups; depends on levels you are offering; stimulates research.
25. The faculty are productive in research.	2.69	7	9	10	3	0	Most vital-unless you run a trade school; helpful for credibility; desirable but not essential; a measure of faculty quality.
26. The faculty are productive in community service.	2.72	3	16	9	1	0	Good public relations and professional recognition; helps in establishing peer relationships and credibility; a measure of faculty involvement; desirable but not essential.
27. The faculty retain clinical competencies.	3.59	18	10	1	0	0	Makes for greater strength in clinics; maintain credibility with students; role model; make better educators; need to prepare students for the present and future, not the past.
28. The faculty are active in their respective professional associations.	3.00	6	17	6	0	0	Public relations for school; helps place graduates; helps politically; maintain contact with real world; for leadership and recognition of faculty; keeps faculty current; scholarly activity may preempt.
29. The school has an effective faculty development program.	3.17	12	11	5	1	0	Avoid stagnation; provides basis for growth and leadership; more important for less experienced faculty; to keep up-to-date; self-initiative should take care of it; not if excellent faculty already aboard.
30. The faculty compensation is higher than the national average.	2.07	2	11	7	5	4	Need the best possible faculty; nice, but; reward system must be good; probably necessary to retain quality; compensation not always a factor.
31. Instructional programs are appropriately clustered by similarity of discipline and/or level.	2.36	2	13	8	3	2	Economy; aid toward core education; diversity adds to quality; useful for shared faculty; otherwise confusion; economic use of resources; permits educational exchange.
32. Instructional programs are interrelated with those of the same discipline in other institutions.	1.76	0	8	6	8	3	Of some use in avoiding destructive competition; nice, but; desirable but not essential.

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION 4	3	2	1	0	SUMMARY OF COMMENTS
33. All instructional programs are accredited as soon as eligible.	3.66	22	5	1	1	0	To allow graduates the most options; credibility; reasonable assurance of minimum standards; a must for image.
34. The school has sufficient "hard money" funding to maintain stability-i.e., to survive on a school-wide basis if all "soft money" were withdrawn.	3.86	25	4	0	0	0	Critical; otherwise programs are unreliable; important for recruitment of faculty; essential for continuity and minimal outside interference; otherwise unstable; shows commitment.
35. The school has the ability to compete effectively for extramural funding.	3.18	11	12	4	1	0	Vital for survival; frosting on the cake--a good program can be excellent with extramural funding; a measure of program quality.
36. Good counseling services are available to the students of the school.	3.28	11	15	3	0	0	Cuts costs of failures; important for retention rate; basic element of a good program; a measure of administrative commitment to education.
37. The student retention rate is high.	3.14	8	16	4	0	0	As long as quality is maintained; evidence of good selection and good instruction; a measure of the educational process; an outcome of an exemplary program; it will be if the school is good.
38. The school conducts follow-up studies on its graduates (to measure the product).	3.07	6	18	4	0	0	Self-correcting feedback; important in terms of production; important to self-evaluation; must modify to meet change; a must; good evaluation procedure.
39. The programs of the school do not produce more graduates than can be employed.	2.78	7	10	7	3	0	Soom room for unpredicted swings in demand; purpose is to educate and inform but let him make the decision; a social responsibility; consider local situation but can export; market dictates; to do otherwise would be unethical.
40. The school has adequate space which is its own specified and identifiable "turf."	3.21	10	14	4	0	0	Vital for morale; essential to get work done; helps stabilize; more of a luxury.
41. The school is innovative in meeting the future demands of the health care system.	3.07	8	13	6	0	0	All units must be prepared for change; a must for a center.
42. The school has the ability to permeate other units of the institution in meaningful interrelationships.	3.07	9	12	5	1	0	Good for new ideas; helps to have others dependent on you; desirable to provide breadth; a part of practical politics; not to violate turf.
43. The students receive a strong liberal education along with their professional education.	3.25	15	7	4	2	0	Must educate professionals and not train technicians; upper division professional programs have little time for liberal education; makes for a better professional.
44. The school has an active continuing education program.	3.14	9	15	3	1	0	Good, but not top priority; to keep up-to-date and in contact with graduates; a new requirement.

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION					SUMMARY OF COMMENTS
		4	3	2	1	0	
45. The school prepares administrators and educators as well as practitioners.	2.69	5	12	5	4	0	Nice, but not essential; an important new role; depends on philosophy; not at the expense of the practitioners; good schools need not, great ones should.
46. The turn-over rate of faculty and administration is low in the school.	2.71	1	20	5	2	0	Stability good; deadwood bad; if high speaks poorly of program administration; turnover can be healthy; little control.
47. There is an upward and outward flow of the faculty and administrators-i.e., the school spawns leaders for schools of the allied health professions in other institutions.	2.33	3	7	13	4	0	Good concept but not high priority; a nice ideal; most important to maintain internal stability; too hard to control or influence; a result of excellence rather than a goal of excellence; a strong center will do this automatically.

APPENDIX IV

QUESTIONNAIRE II

CHARACTERISTICS OF OUTSTANDING *SCHOOLS OF THE ALLIED HEALTH PROFESSIONS
WHICH ARE LOCATED IN ACADEMIC HEALTH CENTERS

Reconsider the following characteristics, keeping in mind the results from Questionnaire I.	Please rerate each characteristic relative to its importance in the evaluation of an outstanding school of allied health. Please check only one column for each characteristic, using the following rating: 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					Why did you rerate the characteristic as you did? Please explain briefly your rationale for each rating, particularly those which differ from your response on Questionnaire I. You may use the back of the questionnaire if you need additional space.
	4	3	2	1	0	
1. There is a clear statement of mission which is publicized and understood within the school and the institution of which it is a part.						
2. Periodic self-study is done to evaluate accomplishment of the mission and to modify statement of mission if appropriate.						
3. Use is made of objective data on the need for specific allied health curricula to avoid proliferation of program offerings.						
4. The school operates a minimum of five curricula.						
5. The number of programs does not exceed the school's resources - particularly those for clinical experience.						

* The term "school" is used here simply as a matter of convenience. For the purposes of this study, it is to be considered synonymous with college, division, etc.

CHARACTERISTICS	RATING 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					RATIONALE
	4	3	2	1	0	
6. The school is located in a medical "community" in which those clinical services essential to the instructional programs are present.						
7. Imaginative use is made of clinical resources.						
8. Other outstanding schools are present within the institution.						
9. There is understanding and support of the school by the chief executive officer of the institution.						
10. There is support of the school by the "power structure" of the institution (i.e., the central administration).						
11. The central administration of the institution is flexible and imaginative.						
12. The dean (chief executive officer) of the school has administrative equality with his/her peers.						
13. The dean has proper administrative authority within the organizational structure of the institution.						
14. The dean possesses leadership skills.						
15. The dean is amenable to change.						

CHARACTERISTICS	RATING 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					RATIONALE
	4	3	2	1	0	
16. The dean has a background in a health profession, or in the education of health manpower, sufficient for him/her to understand the health process and health care system						
17. The dean is recognized as a leader in the field of health care and/or education of health manpower.						
18. The dean has a global perspective on health issues.						
19. The dean is a good "politician."						
20. The dean has substantial contact with the "outside" - he is a strong "outside" man.						
21. The school has a strong "inside man" (this could be the dean).						
22. The dean and his support staff compensation is higher than the national average.						
23. Adequate support services are available.						
24. A large percentage of the faculty have master's and doctoral degrees.						
25. The faculty are productive in research.						
26. The faculty are productive in community service.						

CHARACTERISTICS	RATING 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					RATIONALE
	4	3	2	1	0	
27. The faculty retain clinical competencies.						
28. The faculty are active in their respective professional associations.						
29. The school has an effective faculty development program.						
30. The faculty compensation is higher than the national average.						
31. Instructional programs are appropriately clustered by similarity of discipline and/or level.						
32. Instructional programs are interrelated with those of the same discipline in other institutions.						
33. All instructional programs are accredited as soon as eligible.						
34. The school has sufficient "hard money" funding to maintain stability - i.e., to survive on a school-wide basis if all "soft money" were withdrawn.						
35. The school has the ability to compete effectively for extramural funding.						
36. Good counseling services are available to the students of the school.						
37. The student retention rate is high.						

CHARACTERISTICS	RATING 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					RATIONALE
	4	3	2	1	0	
38. The school conducts follow-up studies on its graduates (to measure the product).						
39. The programs of the school do not produce more graduates than can be employed.						
40. The school has adequate space which is its own specified and identifiable "turf."						
41. The school is innovative in meeting the future demands of the health care system.						
42. The school has the ability to "permeate" other units of the institution in meaningful interrelationships.						
43. The students receive a strong liberal education along with their professional education.						
44. The school has an active continuing education program.						
45. The school prepares administrators and educators as well as practitioners.						
46. The turn-over rate of faculty and administrators is low in the school.						
47. There is an upward and outward flow of the faculty and administrators - i.e., the school spawns leaders for schools of the allied health professions in other institutions.						

The following characteristics were added by respondants to Questionnaire I.	In your best judgment, how important are these characteristics in the evaluation of outstanding schools of allied health? Please check only one column for each characteristic, using the following rating: 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					Why did you rate the characteristic as you did? Please explain briefly your rationale for each rating. You may use the back of the questionnaire if you need additional space.
	4	3	2	1	0	
48. Quality and peer recognition of faculty.						
49. The ability to attract and retain a strong faculty.						
50. Faculty have control of respective curricula.						
51. Access to strong medical and basic science faculty.						
52. Effective methods of instruction and evaluation.						
53. School (faculty) controls admissions.						
54. The school has strong curricula chairmen.						

CHARACTERISTICS	RATING 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					RATIONALE
	4	3	2	1	0	
55. The school has a strong supportive staff.						
56. Department chairmen have necessary autonomy to run their programs.						
57. The Dean/faculty have a strong influence on the Board of Education, Regents, etc. in area planning.						
58. The Dean/faculty are involved with HSAa etc. on local and state basis.						
59. The school has tenure (or long-term non-tenure) arrangements for clinical faculty.						
60. The school has a good record of "publications."						
61. The school does research.						
62. The graduates are employed and are highly thought of.						
63. The graduates stay in the field.						

CHARACTERISTICS	RATING 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					RATIONALE
	4	3	2	1	0	
64. The dean holds important "outside" positions in or related to the field.						
65. The school provides opportunities for clinical activities with other health profession students.						
66. The school engages in cooperative clinical and health science research.						
67. There is evidence of college student body strength by leadership roles among total university student body.						
68. There is limited clinical experience in rural hospitals not in proximity of a medical/health center.						
69. The school has a 10-year plan which is updated yearly.						
70. The dean has a positive working relationship with the dean of the medical school.						

CHARACTERISTICS	RATING 4 - very important 3 - important 2 - moderately important 1 - slightly important 0 - unimportant					RATIONALE
	4	3	2	1	0	
71. The dean has a positive working relationship with the other deans of other professional schools in the center.						
72. The dean has a positive working relationship with the administrator of the teaching hospital.						

APPENDIX V

RANK COMPARISON

CHARACTERISTIC	QUESTIONNAIRE I		QUESTIONNAIRE II	
	RANK	MEAN	RANK	MEAN
1. There is a clear statement of mission which is publicized and understood within the school and the institution of which it is a part.	12	3.48	9	3.70
2. Periodic self-study is done to evaluate accomplishment of the mission and to modify statement of mission if appropriate.	14	3.41	12	3.56
3. Use is made of objective data on the need for specific allied health curricula to avoid proliferation of program offerings.	13	3.45	16	3.33
4. The school operates a minimum of five curricula.	47	1.71	47	1.33
5. The number of programs does not exceed the school's resources--particularly those for clinical experience.	6	3.76	2	3.96
6. The school is located in a medical "community" in which those clinical services essential to the instructional programs are present.	20	3.21	17	3.33
7. Imaginative use is made of clinical resources.	26	3.07	26	3.11
8. Other outstanding schools are present within the institution.	40	2.68	37	2.70
9. There is understanding and support of the school by the chief executive officer of the institution.	5	3.79	3	3.93
10. There is support of the school by the "power structure" of the institution (i.e., the central administration.	8	3.66	7	3.78
11. The central administration of the institution is flexible and imaginative.	30	3.03	27	3.11
12. The dean (chief executive officer) of the school has administrative equality with his/her peers.	4	3.79	4	3.89

CHARACTERISTIC	QUESTIONNAIRE I		QUESTIONNAIRE II	
	RANK	MEAN	RANK	MEAN
13. The dean has proper administrative authority within the organizational structure of the institution.	2	3.83	5	3.85
14. The dean possesses leadership skills.	3	3.83	6	3.85
15. The dean is amenable to change.	7	3.72	10	3.67
16. The dean has a background in a health profession, or in the education of health manpower, sufficient for him/her to understand the health process and health care system.	15	3.38	14	3.37
17. The dean is recognized as a leader in the field of health care and/or education of health manpower.	33	2.83	32	3.00
18. The dean has a global perspective on health issues.	41	2.64	34	2.85
19. The dean is a good "politician."	31	3.00	28	3.11
20. The dean has substantial contact with the "outside"--he is a strong "outside" man.	34	2.79	35	2.85
21. The school has a strong "inside man" (this could be the dean).	16	3.34	15	3.37
22. The dean and his support staff compensation is higher than the national average.	45	1.76	45	1.88
23. Adequate support services are available.	11	3.50	13	3.42
24. A large percentage of the faculty have master's and doctoral degrees.	19	3.24	20	3.26
25. The faculty are productive in research.	38	2.69	38	2.67
26. The faculty are productive in community service.	36	2.72	36	2.85
27. The faculty retain clinical competencies.	10	3.59	11	3.58
28. The faculty are active in their respective professional associations.	32	3.00	29	3.08
29. The school has an effective faculty development program.	23	3.17	21	3.23

CHARACTERISTIC	QUESTIONNAIRE I		QUESTIONNAIRE II	
	RANK	MEAN	RANK	MEAN
30. The faculty compensation is higher than the national average.	44	2.07	43	2.16
31. Instructional programs are appropriately clustered by similarity of discipline and/or level.	42	2.36	42	2.40
32. Instructional programs are interrelated with those of the same discipline in other institutions.	46	1.76	46	1.69
33. All instructional programs are accredited as soon as eligible.	9	3.66	8	3.73
34. The school has sufficient "hard money" funding to maintain stability--i.e., to survive on a school-wide basis if all "soft money" were withdrawn.	1	3.86	1	4.00
35. The school has the ability to compete effectively for extramural funding.	22	3.18	18	3.31
36. Good counseling services are available to the students of the school.	17	3.28	19	3.31
37. The student retention rate is high.	24	3.14	24	3.12
38. The school conducts follow-up studies on its graduates (to measure the product).	27	3.07	30	3.04
39. The programs of the school do not produce more graduates than can be employed.	35	2.78	39	2.63
40. The school has adequate space which is its own specified and identifiable "turf."	21	3.21	25	3.12
41. The school is innovative in meeting the future demands of the health care system.	28	3.07	22	3.15
42. The school has the ability to "permeate" other units of the institution in meaningful interrelationships.	29	3.07	31	3.04
43. The students receive a strong liberal education along with their professional education.	18	3.25	23	3.15
44. The school has an active continuing education program.	25	3.14	33	2.89

CHARACTERISTIC	QUESTIONNAIRE I		QUESTIONNAIRE II	
	RANK	MEAN	RANK	MEAN
45. The school prepares administrators and educators as well as practitioners.	39	2.69	40	2.62
46. The turn-over rate of faculty and administrators is low in the school.	37	2.71	41	2.56
47. There is an upward and outward flow of the faculty and administrators--i.e., the school spawns leaders for schools of the allied health professions in other institutions.	43	2.33	44	2.15

APPENDIX VI

QUESTIONNAIRE II

SUMMARY OF RESULTS

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION					SUMMARY OF COMMENTS
		4	3	2	1	0	
1. There is a clear statement of mission which is publicized and understood within the school and the institution of which it is a part.	3.70	19	8	0	0	0	A good, sound procedure essential for future planning, however it must be frequently reviewed and not allowed to stagnate.
2. Periodic self-study is done to evaluate accomplishment of the mission and to modify statement of mission if appropriate.	3.56	16	10	1	0	0	Necessary to keep current. Must be objective and critical to be good.
3. Use is made of objective data on the need for specific allied health curricula to avoid proliferation of program offerings.	3.33	14	8	5	0	0	The cost of offering programs makes this most important.
4. The school operates a minimum of five curricula.	1.33	3	3	6	3	12	Quality is the real test but probably an exemplary school should have at least five if not more.
5. The number of programs does not exceed the school's resources--particularly those for clinical experience.	3.96	26	1	0	0	0	A basic principle of sound planning.
6. The school is located in a medical "community" in which those clinical services essential to the instructional programs are present.	3.33	13	10	4	0	0	Important and certainly desirable, but outside affiliations can be arranged as long as instructional resources are met.
7. Imaginative use is made of clinical resources.	3.11	12	9	4	1	1	Most important due to limited clinical resources.
8. Other outstanding schools are present within the institution.	2.70	6	12	5	3	1	A measure of the quality and orientation of the institution, however certainly not essential.

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION					SUMMARY OF COMMENTS
		4	3	2	1	0	
9. There is understanding and support of the school by the chief executive officer of the institution.	3.93	24	2	0	0	0	As times in higher education become leaner, this becomes more essential.
10. There is support of the school by the "power structure" of the institution (i.e., the central administration.	3.78	22	4	1	0	0	True of any organization.
11. The central administration of the institution is flexible and imaginative.	3.11	9	13	4	1	0	Desirable, but can be circumvented. Difficult to find.
12. The dean (chief executive officer) of the school has administrative equality with his/her peers.	3.89	24	3	0	0	0	Essential. Makes things go better and equalizes access to resources.
13. The dean has proper administrative authority within the organizational structure of the institution.	3.85	23	4	0	0	0	A must. Essential.
14. The dean possesses leadership skills.	3.85	23	4	0	0	0	Critical. Essential.
15. The dean is amenable to change.	3.67	18	9	0	0	0	He should promote change. Conservatism is also a survival skill.
16. The dean has a background in a health profession, or in the education of health manpower, sufficient for him/her to understand the health process and health care system.	3.37	14	9	4	0	0	Necessary so that the dean can see the big picture. Possible to function without, but more difficult.
17. The dean is recognized as a leader in the field of health care and/or education of health manpower.	3.00	7	13	7	0	0	Credibility factor. Not critical to getting the job done, but nice.

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION					SUMMARY OF COMMENTS
		4	3	2	1	0	
18. The dean has a global perspective on health issues.	2.85	5	14	7	1	0	Leader needs broad view. Very disirable. At least a national perspective. Nice, but not essential.
19. The dean is a good politician.	3.11	7	16	4	0	0	Helpful. Increasingly important. May hinder more than help.
20. The dean has substantial contact with the "outside" - he is a strong "outside" man.	2.35	3	18	5	1	0	Helps image but is not essential.
21. The school has a strong "inside man" (this could be the dean).	3.37	12	13	2	0	0	Vital to have some key administrator in this role. Without inside support would have no progress.
22. The dean and his support staff compensation is higher than the national average.	1.38	1	6	10	7	2	Nice, not essential. Depends on local cost of living and other factors. Educators are traditionally undercompensated compared with practitioners.
23. Adequate support services are available.	3.42	14	9	3	0	0	Basic. Very helpful for efficiency. Can't function without.
24. A large percentage of the faculty have master's and doctoral degrees.	3.26	12	12	1	2	0	Necessary for credibility.
25. The faculty are productive in research.	2.67	8	6	10	2	1	Nice, but teaching is of primary importance. Getting more important. Especially for medical centers.
26. The faculty are productive in community service.	2.85	3	19	3	2	0	Useful. Desirable, but students come first. Important for clinical education.
27. The faculty retain clinical competencies.	3.58	16	9	1	0	0	Can't teach credibly without. In research-oriented medical centers not as important. Role model.
28. The faculty are active in their respective professional associations.	3.08	7	15	3	1	0	The mark of a professional. Good PR for program and school. Important in shaping professional standards.

QUESTIONNAIRE II
SUMMARY OF RESULTS

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION					SUMMARY OF COMMENTS
		4	3	2	1	0	
29. The school has an effective faculty development program.	3.23	10	12	4	0	0	Important for adequate teaching. Becoming more important. A need since most faculty are trained clinicians first.
30. The faculty compensation is higher than the national average.	2.16	1	10	8	4	2	Must at least be competitive. Nice, but not essential. Should at least be average.
31. Instructional programs are appropriately clustered by similarity of discipline and/or level.	2.40	1	11	11	1	1	Can have cost effective advantages. Good for teamwork exposure and allocation of scarce resources. Applicable only to large schools. May hamper communication between two clusters.
32. Instructional programs are interrelated with those of the same discipline in other institutions.	1.69	0	5	11	7	3	May stifle innovation. Helpful but not critical. Logistics frequently make it important to do so.
33. All instructional programs are accredited as soon as eligible.	3.73	21	4	0	1	0	Essential for credibility of programs. A small measure of standards.
34. The school has sufficient "hard money" funding to maintain stability --i.e., to survive on a school-wide basis if all "soft money" were withdrawn.	4.00	26	0	0	0	0	Critical. Absolutely.
35. The school has the ability to compete effectively for extramural funding.	3.31	10	15	0	1	0	Important to supplement basic support unless school has sufficient hard money resources.
36. Good counseling services are available to the students of the school.	3.31	8	18	0	0	0	Important to well being of students. This is what it is all about.
37. The student retention rate is high.	3.12	6	17	3	0	0	Relates to effectiveness of recruitment, selection, or instruction. A measure of admission effectiveness.
38. The school conducts follow-up studies on its graduates (to measure the product).	3.04	5	18	4	0	0	Good evaluation procedure and self-analysis. Important to adjust curriculum.

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION					SUMMARY OF COMMENTS
		4	3	2	1	0	
39. The programs of the school do not produce more graduates than can be employed.	2.63	6	11	6	2	2	Ethical concern. Basic economics. If very important, we are only a trade school.
40. The school has adequate space which is its own specified and identifiable turf.	3.12	8	15	2	0	1	Somewhat dependent upon institutional practice. Important for morale. Important for conduct of stable programs.
41. The school is innovative in meeting the future demands of the health care system.	3.15	7	16	3	0	0	This is a key factor for an exemplary school. Valuable. Important for self-survival.
42. The school has the ability to "permeate" other units of the institution in meaningful interrelationships.	3.04	6	17	3	1	0	Important for general forward progress. Will assist in teaching and research activities and public image of school.
43. The students receive a strong liberal education along with their professional education.	3.15	13	6	7	1	0	Very important, otherwise a trade school. Basic tenet for higher education.
44. The school has an active continuing education program.	2.89	6	15	3	3	0	Becoming more important and future survival may depend on it. Good for feedback to school. Important, but students in residence come first.
45. The school prepares administrators and educators as well as practitioners.	2.62	4	11	9	1	1	Must break out of practitioner mold--educators particularly. To meet trends of profession. At the advanced degree levels. Depends upon mission.
46. The turn-over rate of faculty and administrators is low in the school.	2.56	2	15	7	2	1	Good sign of challenging jobs and progressive school. Need some turnover to keep fresh. Too hard to control.
47. There is an upward and outward flow of the faculty and administrators--i.e., the school spawns leaders for schools of the allied health professions in other institutions.	2.15	3	4	15	2	2	An improper goal, but can be the result of excellence. Nice for reputation.

QUESTIONNAIRE II
SUMMARY OF RESULTS

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION					SUMMARY OF COMMENTS
		4	3	2	1	0	
48. Quality and peer recognition of faculty.	3.40	10	15	0	0	0	Particularly by faculty in other schools and colleges. A status symbol. Credibility. Important for image and self-esteem.
49. The ability to attract and retain a strong faculty.	3.73	19	7	0	0	0	For better prepared students. Basic to quality programs. The reward system can't always be salaries.
50. Faculty have control of respective curricula.	3.15	9	12	5	0	0	Who knows area better. Essential for maintaining a quality curricula.
51. Access to strong medical and basic science faculty.	3.38	15	8	2	0	1	Permits program faculty to concentrate on their specialties. Obvious.
52. Effective methods of instruction and evaluation.	3.54	14	12	0	0	0	Especially important to faculty with primary skills in teaching. Necessary for continuing progress.
53. School (faculty) controls admissions.	3.38	14	8	4	0	0	Should not be administration. Must have control by qualifications vs. open door.
54. The school has strong curricula chairmen.	3.12	8	12	5	0	0	Should be more than one person who can serve as chairman. Need some controls. Helps, but not essential.
55. The school has a strong supportive staff.	3.12	5	19	2	0	0	Basic. Faculty should not perform clerical duties.
56. Department chairmen have necessary autonomy to run their programs.	3.31	8	18	0	0	0	Only as they relate to the dean's office and other chairmen. Basic good administration. Cannot be done by others. Obvious.
57. The dean/faculty have a strong influence on the Board of Education, Regents, etc. in area planning.	2.92	4	15	6	0	0	They should know our needs and objectively distribute funds. No way to control--luck and circumstances. Politically helpful. Opportunity for input helpful.
58. The dean/faculty are involved with HSAs etc. on local and state basis.	2.35	3	10	7	5	1	Nice but not essential. Leadership. Liaison important.
59. The school has tenure (or long term non-tenure) arrangements for clinical faculty.	2.08	3	5	10	3	3	Nice but probably not realistic. Helps stability and morale, but not essential to excellence.

QUESTIONNAIRE II
SUMMARY OF RESULTS

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION					SUMMARY OF COMMENTS
		4	3	2	1	0	
60. The school has a good record of "publications."	2.54	4	10	9	2	1	A mark of a true academic department or school. Role model--leadership in professions.
61. The school does research.	2.77	8	6	10	2	0	A mark of a true academic department or school. Nice but not essential.
62. The graduates are employed and are highly thought of.	3.62	16	10	0	0	0	A mark of a good education. Measure of effectiveness of programs. Measure of teaching results.
63. The graduates stay in the field.	2.46	3	13	5	3	2	May be limited by economic and technological change. A measure of program effectiveness.
64. The dean holds important "outside" positions in or related to the field.	2.69	5	11	8	1	1	Useful but time consuming. Emphasis should be on "minding the store." Nice image and clout. Nice but not essential.
65. The school provides opportunities for clinical activities with other health profession students.	2.72	3	14	6	2	0	Sound educational principle. Nice but interdisciplinary efforts are rare so must not be too important. Training for the real world. Desirable.
66. The school engages in cooperative clinical and health science research.	2.54	0	16	8	2	0	Desirable. "Research" is vital, "cooperative" is nice. Important if opportunities are present.
67. There is evidence of college student body strength by leadership roles among total university body.	2.20	2	9	8	4	2	I truly doubt this assumption! Difficult to achieve due to clinical nature of allied health curricula. Nice for image. Important for self-image of students.
68. There is limited clinical experience in rural hospitals not in proximity of a medical/health center.	2.23	1	8	9	3	1	Valuable, but difficult to arrange, monitor, and evaluate. Can't control, depends on geography, opportunities, people, time, distance, etc.
69. The school has a 10-year plan which is updated yearly.	2.38	3	8	11	4	0	Nice, but may be unrealistic. May decrease flexibility--"married to a plan." General notion good, explicit dates questionable. Ten years may be too long.

CHARACTERISTICS	MEAN RESPONSE	FREQUENCY DISTRIBUTION					SUMMARY OF COMMENTS
		4	3	2	1	0	
70. The dean has a positive working relationship with the dean of the medical school.	3.00	11	8	4	2	1	And other deans as well. They should at least be on speaking terms. Need resources and cooperation of medical school. Very helpful depending on cross-needs between schools.
71. The dean has a positive working relationship with the other deans of other professional schools in the center.	3.31	14	7	4	1	0	Nice, but can be circumvented. Getting along is half the battle.
72. The dean has a positive working relationship with the administrator of the teaching hospital.	3.15	13	6	5	2	0	Because of the clinical facilities he controls. Ideal for good relationships of academic programs to service areas. Only a small percentage of our students have their clinical experience in our own hospital.

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